

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.R.	70622	2-25-99
O.I.P.E. CLASSIFIER			6/30
FORMALITY REVIEW	ERW	70622	7-16-99

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 - ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	12/00
2	5/01
3	5/02
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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